

# Slate Mailer Organization Campaign Statement

(Government Code Sections 84218-84219)

Type or print in ink.

COVER PAGE

SEE INSTRUCTIONS ON REVERSE

## Statement Covers Period

from 07/01/2017

through 12/31/2017

Date Stamp

CALIFORNIA  
1992 FORM **401**

1/7

FOR OFFICIAL USE ONLY

## I Slate Mailer Organization Information

FULL NAME OF SLATE MAILER ORGANIZATION:

Californians For Quality Education

ID NUMBER

1371954

ADDRESS NO AND STREET

CITY STATE ZIP CODE PHONE NUMBER

Covina CA 91722

NAME OF TREASURER:

Yolanda Miranda

ADDRESS NO AND STREET

CITY STATE ZIP CODE DAYTIME PHONE NUMBER

Covina CA 91722

## II Is This A General Purpose Committee?

If this Slate Mailer Organization is also a "general purpose committee" as defined in Government Code Section 82027.5, check box and attach the committee's campaign disclosure report to this statement.

☐

Committee Report  
Attached

☐

ID Number if  
Recipient Committee

## III Summary of Payments

	(A) Total This Period	(B) Cumulative to Date (Since January 1 of calendar year covered)
1 TOTAL PAYMENTS RECEIVED	\$ <u>33676.91</u> Sch. A, Line 3	\$ <u>85036.71</u>
2 TOTAL PAYMENTS MADE	\$ <u>30446.40</u> Sch. B, Line 3	\$ <u>81832.44</u>

## IV Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/29/2018  
DATE

At Covina  
CITY AND STATE

By Yolanda Miranda CA  
SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer Yolanda Miranda CA  
TYPE OR PRINT

Title: ATR

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE

INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT FOR SLATE MAILER ORGANIZATIONS.

State of California Fair Political Practices Commission

# Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>CALIFORNIA 1992 FORM 401</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

Californians For Quality Education

I.D NUMBER

1371954

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT      OPPOSE		
11/10/2017 	Andy Thornburn for Congress  Long Beach CA 90807 Reference No:	Andy Thornburn  Other -- Congress	X	1172.10	1172.10
07/21/2017 	Committee to Recall Judge Persky  Sacramento CA 95815 Reference No:	Aaron Persky  Superior Court Judge  Santa Clara County	X	1000.00	1000.00
08/03/2017 	Connie Conway for BOE 2018  Visalia CA 93291 Reference No:	Connie Conway  Board of Equalization Member	X	3000.00	3000.00

SUBTOTAL

\$

## Summary

- Amount Received - Payments of \$100 or More  
(Include all Schedule A subtotals) ..... \$ 33610.96
- Amount Received - Payments of Less than \$100  
(Not itemized) ..... \$ 65.95
- Total Payments Received (Line 1 + Line 2) Enter here and in  
Column A, Line 1, of the Summary of Payments section on Page 1 ..... \$ 33676.91

# Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>CALIFORNIA 1992 FORM 401</b>
	3/7
I.D NUMBER 1371954	

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

Californians For Quality Education

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT      OPPOSE		
11/09/2017 	Dave Jones for Attorney General 2018  Sacramento CA 95864 Reference No:	Dave Jones  Attorney General	X	3065.42	3065.42
11/09/2017 	Galgiani for State Board of Equali - zation 2018  Long Beach CA 90802 Reference No:	Cathleen Galgiani  Board of Equalization Member	X	8000.00	8000.00
07/12/2017 	John Chiang for Governor 2018  Encino CA 91436 Reference No:	John Chiang  Governor	X	10800.00	21600.00

SUBTOTAL

\$

## Summary

- Amount Received - Payments of \$100 or More  
(Include all Schedule A subtotals) ..... \$ \_\_\_\_\_
- Amount Received - Payments of Less than \$100  
(Not itemized) ..... \$ \_\_\_\_\_
- Total Payments Received (Line 1 + Line 2) Enter here and in  
Column A, Line 1, of the Summary of Payments section on Page 1 ..... \$ \_\_\_\_\_

# Schedule A Payments Received

SCHEDULE A

Statement covers period

from 07/01/2017

through 12/31/2017

CALIFORNIA  
1992 FORM **401**

4/7

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

Californians For Quality Education

I.D NUMBER

1371954

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT OPPOSE		
12/04/2017 	Josh Lowenthal for Assembly 2018  Los Angeles CA 90017 Reference No:	Josh Lowenthal  State Assembly Person	X	648.27	648.27
09/09/2017 	Lisa Bartlett for Supervisor 2018  Irvine CA 92618 Reference No:	Lisa Bartlett  County Supervisor  Orange County	X	923.39	923.39
12/26/2017 	McNally Temple Assoc. Inc.  Sacramento CA 95811 Reference No:	Jeff Reisig  District Attorney  Yolo County	X	280.50	280.50

SUBTOTAL

\$

## Summary

- Amount Received - Payments of \$100 or More  
(Include all Schedule A subtotals) ..... \$ \_\_\_\_\_
- Amount Received - Payments of Less than \$100  
(Not itemized) ..... \$ \_\_\_\_\_
- Total Payments Received (Line 1 + Line 2) Enter here and in  
Column A, Line 1, of the Summary of Payments section on Page 1 ..... \$ \_\_\_\_\_

# Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>CALIFORNIA 1992 FORM 401</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

Californians For Quality Education

I.D NUMBER

1371954

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT      OPPOSE		
07/07/2017 	Mike Levin for Congress  Long Beach CA 90807 Reference No:	Mike Levin  Other -- Congress	X	250.00	500.00
11/30/2017 	Riverside Sheriffs Assoc. Public Education Fund  Los Angeles CA 90017 Reference No:	Chad Bianco  Other -- Sheriff  Riverside County	X	1991.28	1991.28
07/17/2017 	Vazquez for State Board of Equaliz - ation 2018  Long Beach CA 90802 Reference No:	Tony Vazquez  Board of Equalization Member	X	2480.00	4960.00

SUBTOTAL

\$ 33610.96

## Summary

- Amount Received - Payments of \$100 or More  
(Include all Schedule A subtotals) ..... \$ \_\_\_\_\_
- Amount Received - Payments of Less than \$100  
(Not itemized) ..... \$ \_\_\_\_\_
- Total Payments Received (Line 1 + Line 2) Enter here and in  
Column A, Line 1, of the Summary of Payments section on Page 1 ..... \$ \_\_\_\_\_

# Schedule B Payments Made

SCHEDULE B

Statement covers period from 07/01/2017 through 12/31/2017	CALIFORNIA 1992 FORM <b>401</b>
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I.D NUMBER 1371954	

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

Californians For Quality Education

NAME AND STREET ADDRESS OF PAYEE	DESCRIPTION OF PAYMENT	AMOUNT PAID
Citizens for Good Government  Covina CA 91722 Reference No:	Transfer Funds	16000.00
Franchise Tax Board  Los Angeles CA 90013 Reference No:	Taxes	3750.00
Thomas Kaptain  Burbank CA 91506 Reference No:	Consulting fee	2000.00
Thomas Kaptain  Burbank CA 91506 Reference No:	Consulting fee	5000.00
Darby M. Levin  Studio City CA 91604 Reference No:	Consulting	3500.00
Denise Ng  Whittier CA 90602 Reference No:	8/29-8/30/17 Airfaire to Sacramento	116.40

## Summary

	<b>SUBTOTAL</b>	<b>\$ 30366.40</b>
1. Payments of \$100 or More (Include all Schedule B subtotals)	\$	30366.40
2. Payments under \$100 This Period (Not itemized)	\$	80.00
3. Total Payments This Period (Line 1 + Line 2). Enter here and in Column A, Line 2, of the Summary of Payments section on Page 1.	\$	30446.40

# Schedule B-1

## Payments Made By An Agent or Independent Contractor on Behalf of A Slate Mailer Organization

SCHEDULE B-1

Statement covers period from 07/01/2017 through 12/31/2017	CALIFORNIA 1992 FORM <b>401</b> 7/7
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NAME OF SLATE MAILER ORGANIZATION:

Californians For Quality Education

I.D. NUMBER

1371954

NAME OF AGENT OR INDEPENDENT CONTRACTOR:

Denise Ng

NAME AND STREET ADDRESS OF PAYEE	DESCRIPTION OF PAYMENT	AMOUNT PAID
JetBlue  Long Beach CA 90808 Reference No:	8/29-8/30/17 Airfare to Sacramento to attend an event	116.40
Reference No:		
Reference No:		
Reference No:		
Reference No:		
Reference No:		
TOTAL*		116.40

\* Do not transfer to any other schedule or to the Summary. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule B by the Slate Mailer Organization.